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ABSTRACT

In January, 1988, a selected group of Maryland's corporate, union, and government leaders formed an advisory council in an effort to find new approaches to solving the state's child care crisis. By June, the group, which was called the Maryland Employers Advisory Council on Child Care, had produced a statewide plan and a budget that would make the plan work. The plan, known as the Maryland Child Care Resource Center Network and based on a model advocated by child care expert Gwen Morgan, would create an infrastructure of support services that would reach to the roots of the existing system. The core component of the network would be community-based Child Care Resource Centers (CCRC), a system that would offer local services. CCRCs would be linked, coordinated, and assisted by a Statewide Child Care Resource Center. The council advocated a 3-year demonstration project and funding at approximately $7,000,000. This report discusses: (1) the history of child care as a work force issue in Maryland; (2) the Maryland child care delivery problem; (3) the council's challenge to the government, business community, and unions to form a partnership to improve child care statewide; (4) the plan; (5) the need for leadership and coordination; (6) the plan's timetable; and (7) hypothetical case study of network implementation. Related materials are appended, including: (1) a list of employers who have requested information/assistance; (2) a description of "shareholders" in the child care system; and (3) the functions of a Child Care Resource Center. (RH)

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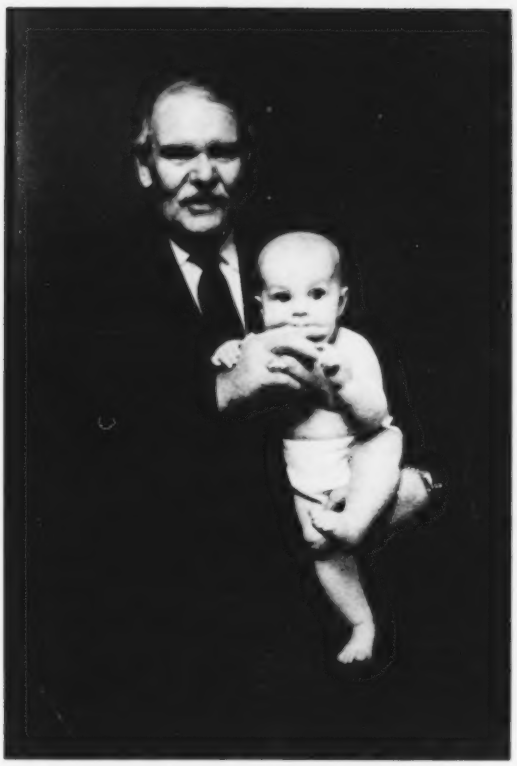

A Private/Public Partnership To Increase Workforce Productivity And Promote Economic Development By Strengthening The Child Care Delivery System

Proposed by the Maryland Employers Advisory Council on Child Care
November 28, 1988

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What could a group of business leaders do about child care?

The Maryland Employers Advisory Council on Child Care, a selected group of Maryland's corporate, union, and government leadership was formed in January 1988 to see whether, by applying their professional insights and skills, they could find some new approaches to the child care crisis. The Council was initiated as part of a project of the Maryland Committee for Children that was funded by the Morris Goldseker Foundation of Maryland, Inc., and the Aaron Straus and Lillie Straus Foundation, Inc. The idea received enthusiastic support from Governor William Donald Schaefer who recognized the critical importance of child care services in maintaining economic vitality and growth in the State.

Sanford I. Weill, President, Chairman and Chief Executive Officer of Commercial Credit Group, Inc., agreed to head the group. He would apply to the analysis of child care issues the same hard-line thinking, zeal, and business know-how he had used on Wall Street. He had seen the need for "expanding the availability of quality affordable child care" in his own business.

> *Essentially, it is in the business community's self interest to concern itself with the child care issue. In the long term, addressing the needs of children is an investment in our society's future.*
>
> —SANFORD I. WEILL

Mr. Weill proved to be a drawing card for recruiting to the Council some of the most respected leaders in Maryland's world of business, labor and government:

- LESLIE B. DISHAROON, Chairman of the Board of Monumental Corporation
- J. RANDALL EVANS, Secretary of the Maryland Department of Economic and Employment Development
- DAVID FONTAINE, Assistant to the President/COPE Director, Baltimore Council AFL-CIO Unions
- JEROME GECKLE, Chairman of the Board of PHH Corporation
- RAYMOND A. MASON, Chairman of the Board and Chief Executive Officer of Legg Mason, Inc.
- GEORGE MCGOWAN, Chairman of the Board of Baltimore Gas & Electric
- REG MURPHY, President and Publisher of the Baltimore Sun
- CARL J. SARDEGNA, President of the Board of Blue Cross/Blue Shield of Maryland
- MARSHA SCHACHTEL, Executive Assistant for Economic Development, Baltimore City Mayor's Office
- VERNON R. TATE, President of Nationwide Fulfillment Systems

Through six months of intensive meetings, the Council members plunged into an analysis of Maryland's child care system. They studied all phases of child care, from the statistics about demand to the impact of regulations to theories about systems of delivery. Supplied with information and charts by a subcommittee of high-level staff (listed in Appendix A) who researched the issues and synthesized data, the Council debated ideas.

The statistics flew, documenting the worsening situation and its effect on employers: an inadequate supply of child care—only one regulated slot for every five children—coupled with a shrinking labor pool that was becoming increasingly comprised of two-career families and single parents. The Council came to see child care as a predominant emotional, logistical, and financial concern of working parents. Not only did the lack of child care impact the productivity of workers, but, perhaps more fundamentally, it could influence their decisions about where and even whether to work. A strong child care system would be essential to maintaining the State's labor force and guaranteeing its economic future.

And so by June of 1988, the Maryland Employers Advisory Council on Child Care had hammered out a plan that would reach across the state and tackle the problems head-on. The Council members used their business acumen to fashion a blueprint for a system that would work as well in Baltimore as it would in Hagerstown and the Eastern Shore. Their plan recognized the interests of the various shareholders in the child care delivery system and created the mechanism for their effective involvement. These shareholders include parents, child care providers, employers, unions, governments, and civic, charitable, and advocacy organizations.

The Council crunched numbers and laid out the details of a budget that would make their plan work. Named the *Maryland Child Care Resource Center Network*, and based on a model advocated by child care expert Gwen Morgan, the plan is designed to reach to the roots of the present system. Rather than opting for a magic project that would make one statement and fade away, it would create an infrastructure of support services.

The core component of the Network would be the Child Care Resource Center (CCRC), which would offer local community-based services that strengthen and expand child care resources. These services would be designed to stimulate the supply, enhance the quality, and increase the accessibility of local child care resources through a range of activities:

- Recruitment and continuing training of providers,
- Technical assistance to employers and child care programs,
- Resource and referral counseling for parents seeking care,
- Parenting education, and
- Data collection and community education.

The CCRCs themselves would be linked, coordinated, and assisted by a Statewide Child Care Resource Center (SCRCC). The SCRCC would establish regional CCRCs through a "Request for Proposal" process, maintain a statewide child care resource and referral database, provide training and technical assistance to the CCRCs, coordinate public policy efforts among CCRCs, raise funds for the Network, broker statewide resource and referral contracts among CCRCs, and maintain liaison with child care delivery systems in other states.

Both the local and statewide CCRCs would be private, non-profit efforts with community-based advisory boards. They would be funded through a combination of public and private sources, including fees for services.

The Council advocates an initial three-year demonstration project to test the model in three geographical areas together representing urban, suburban, and rural settings. Upon the success of the demonstration project, a statewide system of CCRCs in ten regions throughout Maryland is recommended.

The anticipated cost of the demonstration project is approximately $7,000,000. While the Network would generate income from its services, the Council has proposed that the public sector fund two-thirds of the balance of funds necessary. The remaining one-third of the Network's cost would be raised from the private sector by the Council.

> *If our country is to grow and prosper, we have to have the facilities to take care of our children. And the corporate sector, as good citizens, ought to be the leaders to help create these services.*
>
> —SANFORD I. WEILL

One hundred years have passed since the first child care program was established in Maryland. In 1888, the Baltimore Day Nursery at Patterson Park Avenue and Gough Street in Baltimore City opened its doors "to care, during the day, for the small children of poor industrious women who are kept from their homes all day by employment."

Child care was at first identified with efforts to help educate the children of the disadvantaged in recognition of the importance of early child development. Elements of the present child care system were developed in pre-kindergartens established in settlement houses at the turn of the century, and in nursery school services provided for preschool age children of unemployed teachers through the Works Project Adminstration Federal Emergency Education program in the 1930s.

From the inception of day care in this State to the beginning of World War II, the number of day care centers slowly grew to eleven. The first major child care expansion in Maryland and elsewhere occurred during the Second World War. Under the Lanham Act, child care centers were federally funded and were established to address the needs of "Rosie the Riveters" throughout the state and country.

On October 5, 1943, the Baltimore City Council passed the first Ordinance and Regulations Governing Day Nurseries. By 1945, the number of day care centers in Maryland totaled 68 and served approximately 2,320 children. With the termination of the Lanham Act funds in early 1946, Maryland's child day care center program faced virtual collapse, as the number of centers dwindled to 38.

The premise underlying the repeal of Lanham Act funding was that "Rosie the Riveter" would return home and, therefore, would no longer need day care. In fact, this premise proved to be false. While many women did return home, and America experienced the Baby Boom, many women continued to work.

In the 1950s, the model of the father-headed household with mother home caring for the children predominated as the post-war economy boomed. Many women joined the labor market, however. Between 1950 and 1960, female labor force participation increased by 46%.

As the 1960's merged with the 1970's, feminism, high inflation and increasing divorce rates drove record numbers of women into the workplace. Child care was transformed from a service for the working poor to an issue of concern to working families everywhere. Yet the supply of child care did not keep pace with demand.

The almost 40-year period between 1950 and today witnessed an explosion in demand. In 1950, less than 34 percent of working-age women held jobs; today that figure is 45 percent; by the year 2000, more than half, or 67 percent of the workforce will be made of women. And most women of child-bearing age work. In 1986, for example, 72.3 percent of women in the 25–29 age group were working, compared to 35.7 percent in the 25–29 age group in 1955, according to the U.S. Department of Labor, Women's Bureau.

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Between 1979 and 1988, the number of children under age six with mothers in the workplace, increased by 61%. In 1986, the most recent year for which information is available, it was estimated that 67.9% of all Maryland children age 14 and under had mothers in the labor force (648,096). Of these children, 233,877 were under age six and 416,810 were ages six to fourteen. Yet even today, there is only enough regulated child care to accommodate 80,345 children.

As Maryland approaches the 1990's, the shortage of child care is not only affecting children and parents, but it is also affecting corporate productivity. With a shrinking population from which to attract workers, employers are already beginning to experience problems in recruiting and retaining workers. As this trend continues, the lack of child care for working parents is being recognized as a serious barrier to employment.

> *We certainly recognize at my company that there's an increasing shortage of people in the workforce. That naturally leads you to the child care issue. A lot of women already in the workforce are limited in what they can be involved in due to child care problems. A lot can't work because of child care problems.*
>
> —JEROME GECKLE
> Chairman of the Board, PHH Company

From organized labor's perspective, child care is becoming the workers' benefit of the 1990s.

> *Child care is not a women's issue any longer. It's a workers' issue. Period. There are more and more two-income families out of necessity and they are telling us they need child care. Unions have to respond to their members.*
>
> —DAVID FONTAINE
> Director, AFL-CIO Committee on Political Education (COPE)

Good quality child care—that is also affordable, convenient, and in adequate supply—is essential if Maryland's workforce is to meet the demands of a vital and growing economy. As more families are headed by single parents and as more women seek work outside the home, the improvement of child care resources in Maryland will be a critical factor in the State's ability to retain its current workforce and to attract investment by current and prospective employers.

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The initial task of the Maryland Employers Advisory Council was to review the child care services available through the current delivery system, to examine how these services compared to the statewide need and to determine the factors inhibiting the system from being more successful in meeting that level of need. The Council's findings made it overwhelmingly clear that the system was not keeping pace with the demand for quality, affordable child care. For example, the Council learned that:

- The ratio of children under 14 in need of care while their mothers worked to regulated child care slots is 9 children for every slot.
- The ratio of preschool children with mothers in the workforce to regulated child care slots is 5 children for every slot.
- There are critical gaps in service to infants, school-age, and handicapped children.
- The City of Baltimore, with a population of 753,600, has only 161 licensed full-day and before and after school day care centers (a ratio of 1 center for every 4,681 citizens). Baltimore has only one-half the number of centers of comparably sized cities in other states.
- Statistics from a needs assessment model developed in 1985 by the Baltimore City Department of Planning indicate that if there were a 100% increase in the capacity of regulated child care throughout the State, all of the new slots would be utilized.
- Maryland ranks 34th out of the 50 states in terms of the number of children cared for in regulated settings, with only 27% of the children in the state needing care being served (Child Care Index).
- The cost of day care is prohibitive for many parents, particularly the working poor, who rely on public subsidies which have not kept pace with the demand for such aid. Child care, which in Maryland averages $3,411 per child per year for full time preschool care, is the fourth largest budget item for a typical family, exceeded only by food, housing, and taxes. For single parent families, child care consumes an even greater share of family income.
- Maryland's child care regulations and its previous system of triple licensure have served as a hindrance to the expansion of care, particularly by for-profit operators.
- Child care workers are among the poorest paid employees in the labor force. In 1988, the average starting salaries for child care professionals were: Director, $14,733; Assistant Director, $13,678; and Senior Teacher, $10,711. Salaries for family day care providers averaged $9,306.

In trying to analyze the problems, the Council grappled with all the issues surrounding child care in the state. After reviewing child care services available through the current delivery system, they puzzled over the gap between supply and demand. They asked fundamental questions and were concerned, sometimes alarmed, by the answers. What prevented the system from better meeting the needs for quality child care? Why did child care workers receive such low pay? Why did child care cost so much? How could quality care be guaranteed? All these questions, they saw, were linked to the welfare of their own workers and their companies.

They began to collect information from other employers and business groups in the State and discovered significant concern about the issue:

- The Maryland Chamber of Commerce had indentified child care as one of its primary workforce and economic development concerns.
- The Upper Shore Regional Task Force of Business Leaders on Economic Development reported to Governor Schaefer that "the creation of additional day care centers" ranked second on their list of concerns and needs affecting future economic growth for the five county area of Queen Anne's, Caroline, Kent, Talbot and Dorchester Counties.
- The Task Force on Economic Development for the Greater Washington Region identified the lack of affordable, high quality child care as a key concern and a barrier to desperately needed workers. They concluded that the Region needed "to enhance the opportunities for child care centers."
- The Lower Eastern Shore Economic Development Task Force reported to Governor Schaefer that under its "Number One Objective" to develop an adequate labor force, "regional State-supported community day care centers," should be provided "in order to attract more women into the labor market."
- A Governor's Task Force on Private Sector Day Care Initiatives convened under the Hughes Administration had conducted a survey in 1986 to identify employer perceptions regarding the impact of child care on the workforce and responses to such impact. This survey was sent to the Maryland Chamber of Commerce's membership and received a 30% response. In a report later released by Governor William Donald Schaefer, the findings revealed that:

  1. Forty-four percent of the respondents' employees had expressed a desire for assistance with child care;
  2. Management perceived stongly that child care arrangements of employees effect their ability to perform their job (80% indicated that child care has some effect; 55% indicated that child care has a moderate or greater affect);
  3. Only 35% of the respondents did not recognize to some extent that employees' child care needs were a corporate problem;
  4. As company size and female employee population increased, so did the expression of the need for day care and the awareness of the challenge of providing it;
  5. Employer expression of concern appeared to be greatest in the service industries, least in sale companies, with manufacturers occupying a middle ground; and
  6. Almost half of the respondents (48%) requested more information on the employer-supported child care options.

The Task Force recommended the creation of a public/private partnership to implement a comprehensive public awareness campaign to stimulate support for child care on behalf of Maryland's families.

- Child care concerns affect both men and women. Women with children under 12 years of age missed 11.7 days of work per year, compared to 9.6 days missed by women with no children, according to a survey by Research Regional Institute for Human Services at Portland State University. Fathers of children under 12 missed 9.4 days per year, while those without children missed 7.4 days.
- In the first six months of 1988, a total of 63 employers, representing manufacturers, developers, financial institutions, and service industries have contacted the Maryland Committee for Children for information and/or technical assistance regarding the establishment of employer-supported child care options. These companies collectively employed approximately 248,010 workers (see Appendix B).

It's really an issue of productivity. Are people comfortable with their work environment? A person without personal problems would be a more productive employee.

—SANFORD I. WEILL
Chairman, President and Chief Executive Officer,
Commercial Credit Group, Inc.

To the Council, all of this information made it clear that the child care delivery system was not keeping pace with the demand for quality, affordable child care which any parent must have available in order to work. It was also evident that the problem was statewide. Parents, employers, unions, governments, community and civic groups, and others were voicing their own concerns about how the inadequacy of child care services was creating not only current and future social crises, but economic ones as well. And while child care is a far more complex issue than the Council members had anticipated, it did not discourage them from developing a comprehensive plan that is as ingenious as it is practical.

After reviewing the strengths and weaknesses of child care in Maryland, the Council felt certain that the system has a sound base on which to build. It is a system of diverse options that allows parents to choose the form of care that best suits their family's needs. A statewide, Baltimore-based, child care resource and referral system is already in place and offers parents counseling and information regarding existing programs. A new state law, which went into effect on July 1, 1988, consolidates child care regulations under the Maryland Department of Human Resources and represents a major step in streamlining the regulatory process. The professional child care community is itself well organized and dedicated to improving the quality of care through training, improved funding, and coordinated regulatory strategies.

Nonetheless, the lack of quality child care resources in Maryland, as elsewhere throughout the nation, are cause for deep concern. The demand for services continues to outstrip the supply at an ever increasing rate. Regulations, which up to now have been fragmented and uneven, have impeded the growth in available services in the state. Low wages make the recruitment and retention of qualified staff difficult. Even so, the cost of child care services strains, if not overwhelms, the budgets of most families.

Accordingly, the Council focused its attention on identifying a child care delivery model that would make the most effective use of Maryland's existing resources. Requirements of the desired model were that it would:

- build upon the strengths and resources of the existing system of child care delivery;
- eliminate real and perceived barriers faced by prospective for-profit and non-profit child care providers;
- accommodate varying community resources and needs; and
- be comprehensive in its approach by addressing the underlying problems of the system, not just the individual symptoms.

Since the end of World War II, child care issues have remained the domain of parents, providers, public interest groups, and the governmental agencies reponsible for regulations and low-income subsidies. With the change in workforce demographics over the last decade, both government and the business community have begun to take notice of the child care system from an economic point of view.

The Council's research led it to present a challenge to both government and the business community, including labor unions, to form a partnership to improve child care statewide. Neither party alone can effectively solve the child care delivery problems in Maryland. The recent positive efforts of both groups vis-a-vis child care must continue to expand. However, this issue offers an opportunity for business and government to work together in a mutually beneficial venture to improve and expand a statewide child care system that they both need.

The challenge to government is to continue to scrutinize, improve, monitor and enforce child care regulations, to become a model employer, to subsidize child care for the working poor, to stimulate child care supply, to sponsor or fund provider education, to offer employers incentives to respond to the growing need for child care services throughout the state, to offer appropriate infrastructural support, and to make creative use of school resources.

The challenge to business is to look both internally and externally at what it can do to address the child care delivery problems affecting its workforce and community. The creation of the Maryland Employers Advisory Council on Child Care and the task that it has taken on is an example of the leadership and expertise the business community can provide to the general community regarding child care. The continuing role of the business community must include the adoption of responsive in-house corporate policies and programs, funding of child care infrastructural supports, and advocacy on behalf of the child care issue on local, state, and national levels.

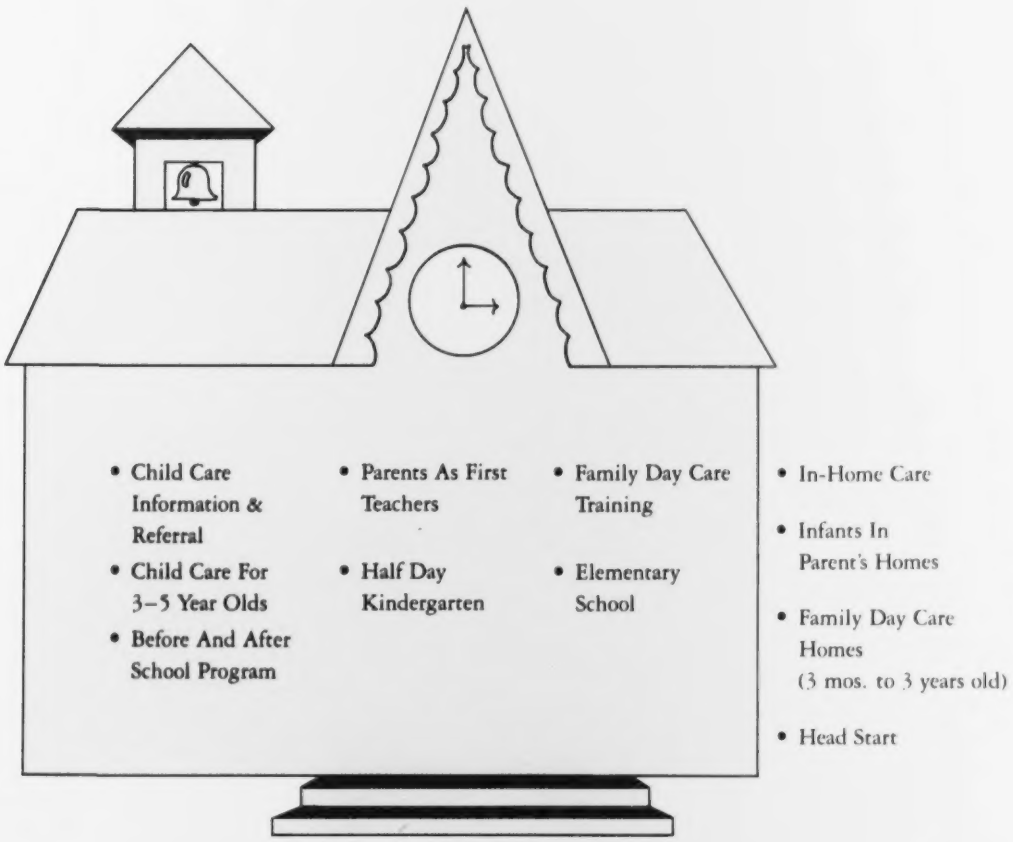
If a child care partnership between business and government is to succeed in addressing the need for quality, affordable, accessible child care, both groups must strive to meet the abovementioned challenges. The Council's "Vision for the Future," presented in the next chapter, offers a structure within which this dynamic partnership can maximize its effectiveness.

As the Council researched the strengths and weaknesses of Maryland's child care delivery system, they considered the visions of effective child care systems proposed by two leading experts in the field, Edward Zigler, founder of the successful Head Start program, and Gwen Morgan, a professor at Wheelock College.

To some, the Zigler model system, which would use neighborhood schools as the hub of a comprehensive child care system, was at first appealing because the structure is already built. Essentially a public child care system, child care for three-to-five-year-olds would be offered at the schools, along with before and after school care, while family day care homes would be designated for children aged three months to three years. Resource and referral centers at the schools would help parents of young children find child care and train family day care providers. At an estimated cost of $75–100 billion, to be paid by property taxes and parent fees, the Zigler plan would require specially certified teachers of early child care. Zigler gained supporters such as Senator Chris Dodd (D–Conn.), who incorporated the idea in a bill which he introduced in the 100th Congress. But the Council saw the expense and the strains on an already overburdened school system as major drawbacks of the Zigler model.

ZIGLER MODEL

Costs: $75–100 Billion
Funding Sources: Property Tax and Parent Fees
Start-Up Costs: $120 Million For 60 Pilot Projects (Federally Funded)


• Child Care Information & Referral
• Child Care For 3–5 Year Olds
• Before And After School Program
• Parents As First Teachers
• Half Day Kindergarten
• Family Day Care Training
• Elementary School
• In-Home Care
• Infants In Parent's Homes
• Family Day Care Homes (3 mos. to 3 years old)
• Head Start

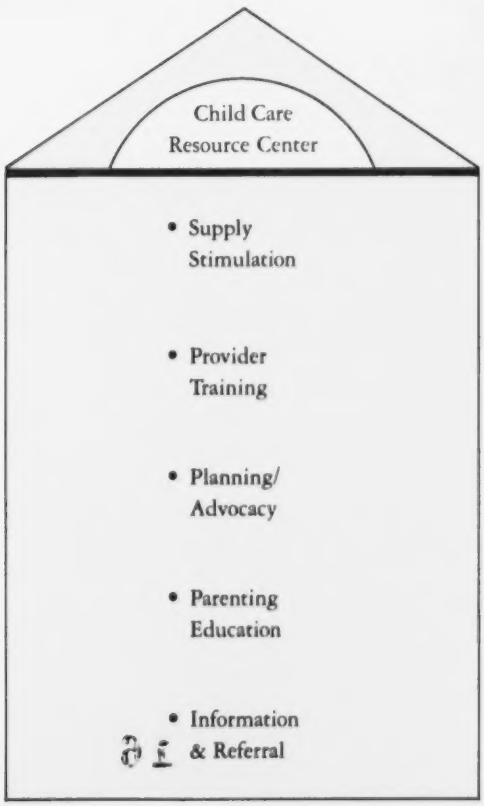
It was Gwen Morgan's vision of child care delivery which won the support of the Council. Based in the community, it improves rather than replaces the already existing array of child care options used by parents. Her model recognizes that excellence has been achieved in some early childhood programs, that the quality of some programs need to be strengthened, that additional funding streams must be found, that child care services must expand to meet demand, and that ultimately, parents should be assured of the availability, accessibility, and affordability of quality child care programs. Moreover, their right to choose the child care most appropriate for their child and family must be preserved.

The central focus of Professor Morgan's plan is a community based Resource Center that provides supports to parents, providers and the community, but which does not bureaucratize the control or centralize the management of programs. Such a structure would allow for creativity, local variety, and a high degree of autonomy, while not sacrificing quality. Morgan's Resource Centers would be non-profit organizations, operating within proscribed guidelines, which are privately and publicly funded.

> *What I believe is that it's easier to achieve quality when you have small programs. We simply can't afford not to use the resources we have. There is a lot of good child care out there. But we can improve it, link it up with a efficient system, make it more accessible and expand it.*
>
> —GWEN MORGAN
> Professor, Wheelock College

MORGAN MODEL

Costs: $32 Billion (Public)
Remainder (Private)
Funding Sources: Improved Tax Credit/Federal & State
Private Charity, Employer Support, Voucher Systems,
State & Local Subsidies for Capital Improvements



- Day Care Centers
- Family Day Care Homes
- Nursery Schools
- Public And Private Elementary Schools
  - — B/A School Care
  - — Early Education
  - — Day Care
  - — Elementary Ed.
- Head Start
- Special Needs Children's Programs
- In-Home Care
- Camp

The result of the Council's research and deliberations is a proposal that the child care delivery system in the state be improved through the application of Morgan's vision. The Council was attracted to Morgan's vision because of the flexibility of its design, which can accommodate differing community needs and resources. Moreover, the model recognizes roles for parents, providers, employers, government, organized labor, and community interests in helping to improve the child care system. A detailed analysis of roles for these "shareholders" is included as Appendix C.

To translate the Morgan vision into a plan, the Council studied child care programs that used components of her vision in Massachusetts and California, states regarded as leaders in child care. It also drew upon the successes of programs in Maryland that used key elements of Morgan's approach including the publicly-funded Children's Resource Center in Montgomery County and the privately/publicly funded Maryland Committee for Children. The Council named its vision the "Maryland Child Care Resource Center Network."

A. THE GOAL

The primary goal of the Maryland Child Care Resource Center Network is to improve the availability and the affordability of quality child care programs throughout Maryland by creating a private, non-profit network of community-based Child Care Resource Centers that perform the following functions:

- identify child care needs and develop more child care resources;
- advise parents regarding available child care options;
- provide technical assistance to child care providers, prospective providers, and employers; and
- increase public awareness about child care issues.

B. THE STRUCTURE

The core component of the Council's plan is a private, non-profit network of Child Care Resource Centers (CCRCs), in each of ten regions of the state, which would offer community-based services to strengthen and expand child care resources throughout the state. A private, non-profit Statewide Child Care Resource Center (SCCRC) would be established to provide coordination and technical assistance to the CCRCs.

The ten CCRC regions, listed below, are consistent with Maryland's regulatory regions for child care:

- Anne Arundel
- Baltimore
  Harford
  Cecil
- Prince George's
- Montgomery
- Baltimore City
- Kent
  Queen Anne's
  Talbot
  Dorchester
  Caroline
- Frederick
  Carroll
  Howard
- Washington
  Garrett
  Allegany
- Somerset
  Wicomico
  Worcester
- Calvert
  Charles
  St. Mary's

Each of the CCRCs and the SCCRC would have community-based advisory boards. Funding would come from a combination of public and private sources, including fees for services.

The Advisory Board of the Statewide Child Care Resource Center would monitor the development and implementation of the Network. It would be comprised of a total of seven individuals representing such groups as consumers, providers, employers, unions, government, as well as civic, charitable, and advocacy groups. Advisory Boards for CCRCs would be similarly comprised on the local level.

C. SERVICES AND FUNCTIONS

Highlights of CCRC services include the recruitment of new providers, child care resource and referral counseling, technical assistance for employers, as well as current and prospective child care providers/programs, provider training, parent education, and more.

The Statewide Child Care Resource Center would establish CCRCs through a "Request for Proposal" process, maintain a statewide child care resource and referral database, provide training and technical assistance to the CCRCs, coordinate public policy efforts among CCRCs, raise funds for the CCRC Network, broker statewide resource and referral contracts among CCRCs, and maintain liasion with child care delivery systems in other states.

The primary services and functions of the SCCRC and the individual CCRCs are briefly described below and elaborated on in Appendix D. Directed to improving the quality and supply of child care, CCRCs would offer the following services:

Resource and Referral counselling (R&R)—Parents would receive help in sorting out the maze of options available through the child care system from R&R counselors, who provide parents with comprehensive information about the child care resources appropriate to their needs, whether they are looking for a reliable child care facility in their neighborhood or near their workplace, family day care providers, or services for children with special needs.

Technical assistance and training for employers—Employers would receive advice on how they can alleviate child care problems for their workers and increase productivity and job retention. CCRCs would offer one-on-one technical assistance about employer-support options, needs assessments, and seminars for corporate planners on a range of options from benefits, such as flexible time schedules, to the development of on-site child care center.

Child care needs assessment and resource development to increase supply—The supply of child care would be stimulated by the CCRCs' assessment of community needs, development of strategies for child care expansion, and provision of technical support for providers and businesses who are interested in starting any form of child care. Armed with the information and vital resources for planning and funding, those in the business of child care would be stimulated to expand, and others would be encouraged to venture into the field, ultimately increasing the supply. Statewide recruitment campaigns, co-ordinated by the Statewide Child Care Resource Center and implemented by the local CCRCs, would develop more supply and provide impetus for more stable working conditions for child care workers. Publications would be developed on regulations, zoning, business plans, insurance plans, and resources for finding everything from architects to funds.

Training for parents and providers—Information and training to help parents improve their parenting skills, as well as to better cope with the stress of work and family, would be made available. Classes and seminars for child care providers would focus on the elements of quality child care programs, including management, program curriculum, and teaching techniques.

Public education—Data on all aspects of child care would be gathered and published, including but not limited to supply and demand statistics. The staff and CCRC Advisory Boards would reach out to all segments of the community and provide education on needs and goals, sparking more commitment from the public to improving the child care system. The group of shareholders would grow into a solid constituency better able to advocate for change.

D. THE DEMONSTRATION

The Council advocates an initial three-year demonstration project to start-up and refine the Maryland Child Care Resource Center Network. The Statewide Child Care Resource Center would be established, and one CCRC each would be established in an urban, suburban, and rural setting. By the end of three years, the Statewide Child Care Resource Center and three CCRCs would be in place and fully operational. Upon the success of the demonstration project, a statewide system with CCRCs in ten regions is recommended.

A chart depicting the services provided by the proposed demonstration project follows.

MARYLAND CHILD CARE RESOURCE CENTER NETWORK
DEMONSTRATION PROJECT
Primary Services & Functions

STATEWIDE CHILD CARE RESOURCE CENTER

1. Coordinates fundraising on state & national levels, from public & private sources.
2. Develops & issues requests for proposals for CCRC operations; selects proposals; monitors performance.
3. Provides start-up & ongoing training and technical assistance to CCRCs.
4. Maintains & distributes to CCRCs the centralized computer listings of child care programs.
5. Develops informational & marketing publications used by CCRCs.
6. Collects & analyzes child care data for use in public education & advocacy.
7. Brokers resource & referral services to employers with employees statewide.
8. Maintains liaison with child care systems in other states.

CHILD CARE RESOURCE CENTERS (CCRCS)

URBAN

1. Child care resource & referral counseling
2. Technical assistance for providers & vendors
3. Technical assistance for employers
4. Resource development
5. Training programs for providers
6. Parent education
7. Data collection, planning & advocacy
8. Public education

SUBURBAN

1. Child care resource & referral counseling
2. Technical assistance for providers & vendors
3. Technical assistance for employers
4. Resource development
5. Training programs for providers
6. Parent education
7. Data collection, planning & advocacy
8. Public education

RURAL

1. Child care resource & referral counseling
2. Technical assistance for providers & vendors
3. Technical assistance for employers
4. Resource development
5. Training programs for providers
6. Parent education
7. Data collection, planning & advocacy
8. Public education

E. THE EXPECTED RESULTS

The implementation of the proposed Maryland Child Care Resource Center Network would bring about needed improvements to the current child care system—but probably not all at once. The model puts into place an infrastructure of support services which is critical to the development and maintenance of good quality child care programs. Experience here in Maryland and elsewhere in the country has shown that the kinds of services that would be provided by the Statewide Child Care Resource Center and Child Care Resource Centers result in a greater supply of better quality child care.

Once fully operational and funded, highlights of what each CCRC could anticipate accomplishing annually would include:

- providing child care resource and referral counseling to approximately 6,000 parents (6,000 parents × 3 CCRCs = 18,000 parents);
- conducting monthly technical assistance start-up workshops to prospective child care center operators (24 attendees × 12 workshops = 288 attendees × 3 CCRCs = 864 trainees);
- providing information to 300 employers regarding work/family options (25 inquiries/month × 12 months = 300 employer inquiries × 3 CCRCs = 900 employer inquiries);
- providing in-depth consultation to four prospective center operators resulting in the creation of four child care centers a year (80 slot capacity/center × 4 centers = 320 slot increase × 3 CCRCs = 960 slot increase);
- engaging in family day care recruitment activities which result in an increase of 200 family day care homes (200 × 5 slots per home = 1,000 slot increase × 3 CCRCs = 3,000 slot increase);
- procuring contracts from five employers to provide resource and referral counseling services for their employees (5 employer contracts × 3 CCRCs = 15 new employer contracts);
- providing weekly child care training programs which benefit 1,560 child care providers (52 programs × 30 attendees/program = 1,560 attendees × 3 CCRCs = 4,680 attendees);
- contracting with 4 child care centers/quarterly to conduct a 5 evening session parenting series attended by 25 parents/center (4 centers × 4 quarters × 25 parents = 400 parents × 3 CCRCs = 1,200 parents);
- providing monthly statistical information to advocates, business, and government regarding child care supply and demand; and
- broadening the advocacy and funding base for child care initiatives through public educational activities and events.

F. THE BUDGET

We're not asking for tens of millions of dollars to be thrown at something before the infrastructure is in place. The problem we've had for decades isn't going to be solved in minutes. But we're building up the structure.

—SANFORD I. WEILL
Chairman, Maryland Employers Advisory Council on Child Care

The total cost of the three year demonstration model is estimated at approximately $7,000,000.

Budgets for the demonstration period and the transition to statewide implementation of the model are indicated on the two charts that follow.

I. MARYLAND MODEL CHILD CARE DEMONSTRATION PROJECT BUDGET

Project	Year 1	Year 2	Year 3	Grand Total
I. Statewide Child Care Resource Center (One)				
A. Operating Expenses	$714,240	$756,904	$802,318	$2,273,462
B. Capital Expenses	$90,086	—	—	$90,086
Statewide Child Care Resource Center Total:	$804,326	$756,904	$802,318	$2,363,548
II. Child Care Resource Centers (Three)				
A. Operating Expenses	$531,051	$1,838,631	$1,948,950	$4,318,632
B. Capital Expenses	$101,898	$211,458	—	$313,356
Child Care Resource Centers Total:	$632,949	$2,050,089	$1,948,950	$4,631,988
III. Total Annual Project Funds Required (I + II):	$1,437,275	$2,806,993	$2,751,268	$6,995,536

II. MARYLAND MODEL CHILD CARE DEMONSTRATION PROJECT BUDGET IF IMPLEMENTED STATEWIDE

Project	Year 1	Year 2	Year 3	Grand Total
I. Statewide Child Care Resource Center (One)				
A. Operating Expenses	$714,240	$756,904	$802,318	$2,273,462
B. Capital Expenses	$90,086	—	—	$90,086
Statewide Child Care Resource Center Total:	$804,326	$756,904	$802,318	$2,363,548
II. Child Care Resource Centers (Ten)				
A. Operating Expenses	$1,770,170	$6,128,770	$6,496,500	$14,395,440
B. Capital Expenses	$339,660	$704,860	—	$1,044,520
Child Care Resource Centers Total:	$2,109,830	$6,833,630	$6,496,500	$15,439,960
III. Total Annual Project Funds Required (I + II):	$2,914,156	$7,590,534	$7,298,818	$17,803,508

G. FINANCING PLAN

The Council proposes that the funding of the three year demonstration project be developed from a combination of public and private sources. The proposed funding split is 2/3's from the public sector and 1/3 from the private sector. The public portion of funding would come from state and local government (with the possibility of federal funding if pending legislation passes). Private funding would be generated by user fees, contracts for service, and contributions/grants from individuals, as well as family and corporate foundations. The latter funding would be generated by a fundraising campaign headed by one or more members of the Council. The attached exhibit outlines the proposed cost to each sector of this financing plan.

III. MARYLAND MODEL CHILD CARE DEMONSTRATION PROJECT BUDGET

Project	Year 1	Year 2	Year 3	Grand Total
Funds Required:	$1,437,275	$2,806,993	$2,751,268	$6,995,536
Less Income Generated by SCCRC & CCRCs:	$31,647	$172,679	$235,011	$439,337
Balance of Funds Required:	$1,405,628	$2,634,314	$2,516,257	$6,556,199
Public Sector Funding at 2/3:	$937,085	$1,756,209	$1,677,505	$4,370,797
(Sources: Federal, State, County and City—Funding breakdown undetermined)				
Private Sector Funding at 1/3:	$468,543	$878,105	$838,752	$2,185,399
(Sources: Individual, Corporate and Community Philanthropy—Funding breakdown undetermined)				

H. THE EVALUATION

The Statewide Child Care Resource Center and Child Care Resource Centers in the demonstration model would each be responsible for preparing annual reports regarding their progress and accomplishments. The Statewide Child Care Resource Center would be responsible for preparing a final report (for public inspection) which would document and evaluate the demonstration's effectiveness in improving and expanding the availability and affordability of quality child care throughout the demonstration area.

I. DEMONSTRATION PROJECT OVERSIGHT BY STATE GOVERNMENT

In the 1988 session of the Maryland General Assembly, Governor William Donald Schaefer, as part of his Child Care Initiative, proposed the concept of the consolidation of child care services within the Department of Human Resources because of the Department's historic knowledge of and commitment to child care services across the state. The resulting legislation was co-sponsored by 52 members of the House of Delegates and 8 members of the Senate. The Maryland General Assembly agreed with the Governor's position and passed SB 443/HB 767 which places all regulatory authority for child care licensing in the Department of Human Resources. Accordingly, the Council recommends that the State's role in the proposed Maryland Child Care Demonstration Project be assigned to the Department of Human Resources.

However, it is also critical that the Maryland Child Care Resource Center Network maintain close relationships with all branches of state government involved in the coordination and delivery of child care-related resources. In this manner, the Maryland Child Care Resource Center Network and the child care community would have access to a wide range of State personnel, resources, policies, and programs.

The Maryland Child Care Resource Center Network cannot become a reality without the commitment of government and the private sector. While the Maryland Employers Advisory Council on Child Care's plan promises immediate results along with long term change, much remains to be accomplished. Although Governor Schaefer has indicated his support for the plan, the 1989 Maryland General Assembly would have to consider the plan's policy implications and determine its legislative course of action. If the Assembly supports the Council's plan, it would have to review its cost and appropriate the necessary funding. Local governments and communities who wish to have a Child Care Resource Center in their region must identify community resources to help plan, implement, monitor, and fund the CCRC. The Maryland Employers Advisory Council must enlist the support of companies and foundations across the state to raise the private sector share of the Maryland Child Care Resource Center Network's cost.

Maryland's leaders now have a unique opportunity to join a partnership which can lead the state ahead of the rest of the nation in developing a stronger solution to the child care crisis than ever before seemed possible. In the final analysis, the creation of the Maryland Child Care Resource Center Network is dependent upon a partnership which draws strength from all sectors of the community, heralding a new era of cooperation, using the best of all the State's resources, to strengthen child care delivery across Maryland.

> *We're in the business of uncomplicating problems. After examining the child care dilemma in the state, it is not that overwhelming. We can work on it. We like to pride ourselves as being on the very leading edge, in terms of turning the city of Baltimore around, for example. The work of the Council represents the continuation of that kind of leadership.*
>
> — JEROME GECKLE

	ACTION	TARGET
A.	Council Report Released to Business Community at Conference & Private Sector Fundraising Initiated	Fall 1988
B.	Lobby Maryland Model through the 1989 Maryland General Assembly	January–April 1989
C.	Receive Demonstration Project Funding	July 1989
D.	Statewide Child Care Resource Center Established	July 1989
E.	RFP's for CCRCs Issued	August 1989
F.	CCRCs Established By	January 1990
G.	Demonstration Project End	December 1993
H.	Evaluation, Modification and Statewide Implementation	February 1994

The Statewide Child Care Resource Center (SCCRC) issued a request for proposals aimed at establishing Child Care Resource Centers (CCRCs) in one rural, suburban, and urban region of Maryland. After reviewing responding proposals from a variety of sources, the SCRCC accepted a proposal from the Eastern Shore to establish a model CCRC which would serve the largely rural Talbot, Caroline, Queen Anne's, Dorchester, and Kent Counties.

Following the contract award, a CCRC Director was hired, office space was procured and a child care resource and referral (R&R) program for these upper shore counties was established with a database provided by the SCCRC. The creation of the CCRC and the establishment of the R&R attracted a great deal of publicity for the region and for the child care issue. One article mentioned that the CCRC would also be working with employers regarding work/family issues like child care.

Vernon Tate, President of Nationwide Fulfillment Systems in Ridgely, Maryland, read that article in the Eastern Shore Times and thought that the CCRC might just be able to help him with a problem he was having at his company. As an employer of anywhere from 250–400 employees depending on the time of the year (the majority of whom are young women), he had already recognized that the unavailability of child care in his community was having an adverse impact on his company's ability to attract and retain workers.

Mr. Tate had already been in touch which Governor Schaefer about the problem. Not only had Governor Schaefer sent his staff to assist Mr. Tate, but the Governor also invited Mr. Tate to accompany him on a trip to Boston to see what state government was doing in Massachusetts to encourage the expansion of quality, public and private child care programs. Mr. Tate had not yet been able to develop a child care center for his employees.

After receiving a referral from the Governor's Office for Children and Youth, Mr. Tate's luck began to change when he called the Eastern Shore's Child Care Resource Center. After speaking with the Director, Mr. Tate learned that the CCRC was offering a seminar on how to start a child care center the following week which was designed to familiarize prospective center operators with the basics of child care delivery and start-up. Mr. Tate assigned Art Libby, a senior member of his staff, to attend the seminar.

Mr. Libby returned from the seminar with folders full of information about child care regulations, zoning procedures, building requirements, start-up budgets, needs assessments, operating budgets, timelines, et cetera, which had been provided to the CCRC by the Statewide Child Care Resource Center. All of the material he received was useful information. But perhaps the most useful knowledge Mr. Libby acquired was the simple fact that with a workforce of only 250–400 people, Nationwide Fulfillment Systems did not have a sufficient supply of workers to generate enough children to fill a 60–80 slot child care center (which he had learned was the necessary capacity for a center to be economically viable).

Mr. Libby was disappointed. He knew that his company was typical of a lot of companies on the Shore that, as a result of an increase in commercial and industrial development, have witnessed a diminishing labor force. He also knew that the Upper Shore Economic Development Council, representing Talbot, Caroline, Queen Anne's, Dorchester, and Kent Counties, had identified developing child care resources as one of its top five economic development priorities. Most importantly, the seminar had taught him about the concept of a consortium-based child care center, whereby a group of business concerns co-venture the development of a child care center and share its financial cost and liability. He was pretty sure that consortium-based child care was the op-

tion of choice for Nationwide Fulfillment Systems. Mr. Libby knew that there were 10 companies within an 8 mile radius that employed a total of 1,600 workers. He also had learned at the seminar that a good rule of thumb is that it takes at least 1,000 workers to fill a 60–80 child care center.

After conferring with Mr. Tate, he received approval to convene a meeting of these and other employers in Caroline County regarding the possible development of a consortium child care center. Mr. Libby invited the Director of the CCRC to be the featured speaker at this meeting. The Director accepted and, accompanied by the new child care resource development coordinator, made a presentation to the group about child care supply in the Upper Shore Counties, the impact of child care on workforce productivity and economic development, and the range of responsive employer-supported child care options. The Director handed out a variety of brochures on the topic which had been developed by the Statewide Child Care Resource Center.

During the question and answer session, at which time discussion focused on the consortium child care center option, the group learned that one of the first steps toward the creation of a child care center is the development, implementation, and analysis of an employee child care needs assessment survey. By the conclusion of the meeting, 10 employers had agreed to conduct a child care needs assessment survey within their companies.

Rather than using their own limited resources, the group of employers decided to contract with the CCRC to develop, implement, and analyze a child care needs assessment. They decided that one instrument would be developed for all the companies, and that the results would be analyzed individually and collectively.

Within 45 days, the needs assessment was distributed to the employees of the concerned companies. Within 60 days of collecting the returned surveys, the employer group received the results of the assessment and learned that collectively, there was sufficient substantiated interest in a consortium-based child care center to recommend its development.

"Where do I go from here?" was the first question that crossed Mr. Libby's mind. He again contacted the CCRC Director for help. He learned that the Resource Development Coordinator could contract to help the group develop and disseminate a request for proposals for a center operator and evaluate any proposals which were returned. With the Resource Development Coordinator's help, a center operator would be identified who could offer a child care center which was responsive to the employers' needs as identified by the needs assessment. Mr. Libby also received a list of child care consultants whom he could contact for such assistance, but he decided to contract further with the Eastern Shore's CCRC.

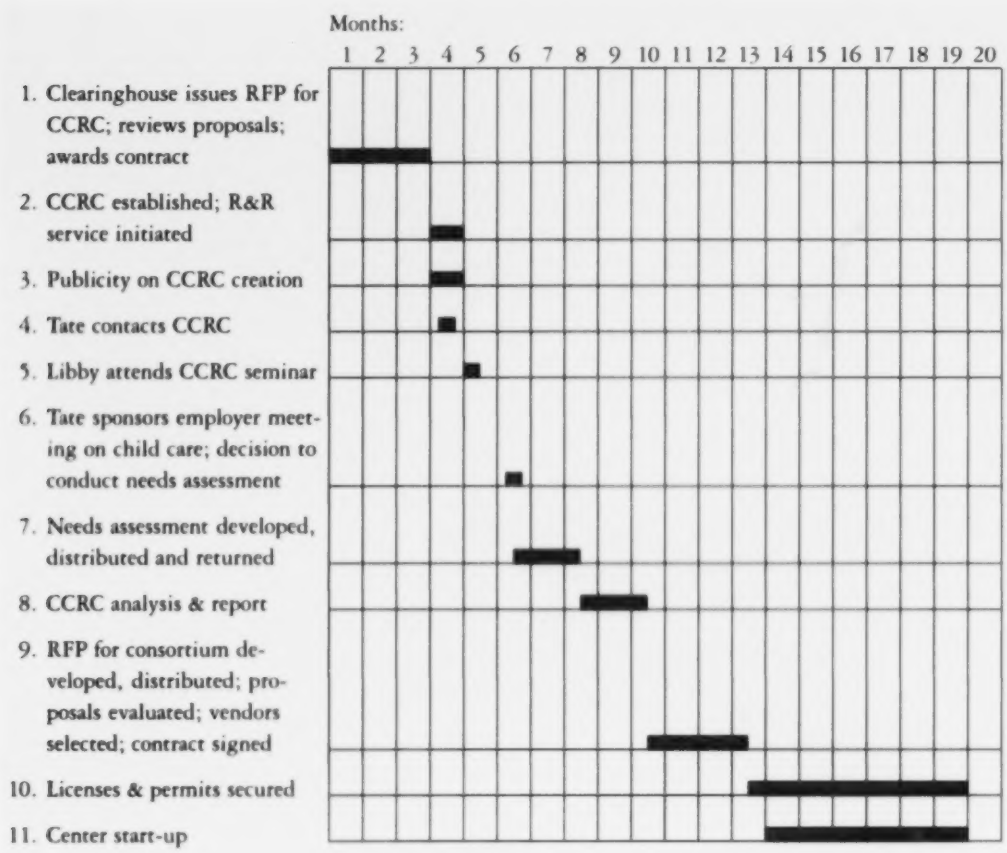
Thirty days later an "RFP" was distributed to every child care center in Maryland, as well as out-of-state, for-profit, child care companies. Another 45 days had passed before the response deadline. By that time, the group had received proposals from a total of 10 respondents. According to the review criteria established by the CCRC consultant, the proposals were evaluated, and a center operator was selected.

The center operator identified was delighted with the contract award. In return for a guaranteed number of reserved slots for consortium members, as well as admission preference and fee reductions for the children of consortium members' employees, the operator received financial start-up assistance from the consortium. The operator also applied for and received a loan from the Maryland Department of Economic and Employment Development to partially finance the project.

Within sixteen months from Mr. Tate's first discussion with the CCRC, a 80 slot child care center opened to the public in Ridgely, Maryland. Given all the publicity Mr. Tate's company received about the center's opening, he was beseiged with phone calls from job applicants and other employers looking for information.

Publicity about the opening in the business section of *The Sun* caught the attention of Mr. Robert Smith, President of ABC Company in St. Mary's County. He had been hearing a lot about the child care problems his employees were facing and wanted some information. He noticed that the telephone number of the Statewide Child Care Resource Center was listed in the article and decided to call for help...

HYPOTHETICAL CASE STUDY TIME LINE


Months:
1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20
1. Clearinghouse issues RFP for CCRC; reviews proposals; awards contract
2. CCRC established; R&R service initiated
3. Publicity on CCRC creation
4. Tate contacts CCRC
5. Libby attends CCRC seminar
6. Tate sponsors employer meeting on child care; decision to conduct needs assessment
7. Needs assessment developed, distributed and returned
8. CCRC analysis & report
9. RFP for consortium developed, distributed; proposals evaluated; vendors selected; contract signed
10. Licenses & permits secured
11. Center start-up

Maryland Employers Advisory Council on Child Care Subcommittee

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Commercial Credit Group, Inc.

RITA ENNIS
Director, Employee Relations
PHH Company

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JANET SINGERMAN
SANDRA J. SKOLNIK
MARCIA SPRINKLE
Maryland Committee for Children, Inc.

Employers Who Have Requested Employer-Supported Child Care Information/Assistance

1. Applied Physics Laboratory (4,000)
2. Armco, Inc. (850)
3. Baker-Watts (240)
4. Baltimore City Government (34,756)
5. Baltimore City State's Attorney's Office
6. Baltimore County General Hospital (1,163)
7. Baltimore Gas & Electric Company (8,858)
8. Baltimore Life Insurance Company (265)
9. Baltimore Sun (2,700)
10. Baxter Laboratories (210)
11. Bendix (3,000)
12. Bethlehem Steel, Inc. (10,000)
13. Biospherics (330)
14. Blue Cross/Blue Shield of Maryland (2,100)
15. Bon Secours Hospital (870)
16. Catalyst Research, Inc. (350)
17. Church Home Hospital (922)
18. Citicorp, Inc. (889)
19. Commercial Credit Group, Inc. (800)
20. District Photo, Inc. (1,000)
21. Equitable Bank (2,970)
22. Fidelity & Deposit (1,350)
23. First National Bank (3,363)
24. Franklin Square Hospital (2,400)
25. Frostburg State College (700)
26. Greater Baltimore Medical Center (2,000)
27. Heron Point of Chestertown (300)
28. Howard County General Hospital (1,000)
29. Howard County Government (5,178)
30. Jiffy Lube International (225)
31. John Hanson Savings & Loan (300)
32. Johns Hopkins Hospital (5,068)
33. Johns Hopkins University (13,585)
34. Legg Mason (1,000)
35. Lehrer, McGovern, Bovis (800)
36. Londontown Manufacturers (1,900)
37. Manor Care–Rossville (136)
38. Martin-Marietta (5,500)
39. Maryland Medical Laboratories (959)
40. Maryland National Bank (5,619)
41. Maryland State Government (89,732)
42. Medical & Chirurgical Society of Maryland (60)
43. Mercy Hospital (1,247)
44. Mt. Washington Pediatric Hospital (320)
45. Nationwide Fulfillment Systems (325)
46. Nova Pharmacueticals (185)
47. PHH Company (4,300)
48. Pharmakinetics (215)
49. Piper & Marbury (208)
50. Port East Transport (250)
51. Potomac Edison Company (766)
52. Rouse Company (1,644)
53. St. Vincent's (700)
54. S. Schwab & Company (500)
55. Seton Industrial Park (2,000)
56. Sheppard Pratt Hospital (1,500)
57. Social Security Administration (12,000)
58. Smithsonian Institute
59. Triumph Industrial Park (2,000)
60. U.S. Fidelity & Guaranty (2,000)
61. United Way of Central Maryland (102)
62. Whiting-Turner Contractors (300)

*Parentheses indicate estimated workforce in Maryland.

"Shareholders" in the Child Care System

The Maryland Employers Advisory Council on Child Care recognized that the child care delivery system in this state is influenced by many shareholders in addition to business and government, including providers, consumers, unions, and civic, charitable, and advocacy groups. Rather than assume knowledge of these groups' attitudes and perceptions as to their roles and responsibilities regarding child care, numerous representatives of each group were polled (a list of those contacted appears at the end of this Appendix). The results of these contacts indicated that each of these groups has its own reasons for considering child care an issue of importance and some perception of their current and future roles and responsibilities for improving the system.

PROVIDERS

Providers are the key to a successful child care delivery system. Some of the issues which impact providers include: difficulty in starting-up programs because of regulatory barriers and lack of funding sources, affordability as a natural barrier to supply, quality of staff and appropriate salaries to attract and retain staff, and the shortage of trained child caregivers.

Until recently, for-profit child care providers were reluctant to move into Maryland due to regulatory barriers to their entry and operation. Non-profit child care programs generally develop to meet the needs of a specific constituency in a single location. As a result, child care has not been able to comprehensively keep pace with demand.

In the ideal child care delivery system, providers would offer quality, accessible, affordable care, with a wide range of options to meet parents' individual needs. They would be responsive to consumers and contribute to the overall effectiveness of the system through networking, cooperative efforts, professional training and ethics, and promotion of the child care profession. Furthermore, they could provide assistance in the development of new facilities, staff, and programs.

CONSUMERS

The short supply of quality, accessible, affordable child care has the greatest impact on the consumer of child care, working parents. In dealing with their child care needs, parents must make difficult choices which significantly affect their lifestyles. For most people, working is not a matter of choice, but one of necessity. Many working parents find themselves torn between meeting the needs of their employers and their children when faced with inadequate child care arrangements.

Locating quality, accessible, affordable child care arrangements requires significant effort on the part of parents. Most have little knowledge of where to start or how to evaluate existing programs. When the right program is found, ability to pay becomes the primary issue for many.

In the ideal child care delivery system, parents would know where they could go to get assistance in identifying and evaluating potential child care providers. They would be able to afford the cost of that care and would monitor the quality of service provided to assure that it meets their standards.

CIVIC, CHARITABLE AND ADVOCACY GROUPS

Every civic, charitable, and advocacy group exists because someone invested in the future. Each group's founder believed so strongly that the world would be made better, that he/she invested the effort to bring the organization into being in order to improve the future quality of life. No issue embodies more implications for the future quality of life than the issue of how our society will meet the needs of its children. By their expressed commitment to quality of life, civic, charitable, and advocacy groups have a natural attraction to the child care issue and a vital role to play in the design of an improved child care delivery system. Furthermore, such groups find child care to be an issue for them because of the specific needs and interests of their members.

The level of involvement in child care solutions would vary with the personal needs and professional activities of a group's membership. However, all groups should learn the child care-related

needs and ideas of their constituencies, promote member awareness of how they are impacted by child care issues, and lobby for delivery system improvements. Some groups would be interested in going further by affiliating with other groups to express their concerns, advocating for funding changes to advance their priority of child care services, or providing direct services.

UNIONS

The AFL-CIO and its affiliated unions recognize their advocate role as it relates to workers' child care concerns.

The AFL-CIO encourages its affiliated local unions to assess the child care needs of their members and to disseminate information on available community child care services. Also, the AFL-CIO encourages its affiliates to include child care benefits as a high priority on their collective bargaining agendas, including consideration of such options as: labor management child care committees; paternity, as well as maternity, leave; employer/union child care centers; direct financial subsidies to parents; and employer/union donations to child care facilities.

Labor's role is to advocate for workers' needs, to facilitate the dissemination of information and education to workers, and to develop partnerships with management as a provider where resources allow.

EMPLOYERS

As workforce demographics change, employers must recognize that child care will become an issue of increasing concern for their employees. As a result, it will become an issue in the recruitment and retention of qualified employees, as well as a productivity issue.

Through their policies and benefits programs, employers can significantly reduce their employees' child care burdens. The options for employers range from relatively simple flexible time-off policies, to the purchase of services (i.e. resource and referral, child care slots), to flexible benefits programs including reimbursement for child care expenses, to the creation of on or near-site child care centers.

GOVERNMENT

Both state and local government are concerned with stimulating economic vitality and growth. Quality, accessible, affordable child care has become a critical factor in attracting business, due to the changing demographics of the workforce (i.e. increasing numbers of women, dual career families, single parents, and a general shortage of labor). Furthermore, government has a responsibility to provide for the general health and welfare of its citizenry. Hence, quality child care services should be and are a matter of concern to government.

Currently, state government views its responsibilities as falling primarily within the realm of providing leadership with regard to a wide array of child care-related issues, the regulation of child care programs, financial assistance to the working poor, and financial assistance for child care start-up. Local governments vary widely in their level of activity and funding priority given to child care.

MARYLAND CHILD CARE SHAREHOLDERS—ROLES & RESPONSIBILITIES

	Government	Providers	Consumers	Employers/Unions	Civic, Charitable & Advocacy
Group Membership	State and local governments, including schools (elementary, secondary, and higher education) and their organizational support network (PTAs, etc.)	For profit and non-profit facilities; individual providers	Parents; sponsoring organizations in purchaser role	Employers and unions as individual units and in allied organizations by industry, region or state	Chambers of Commerce; Senior citizen orgs.; United Way agencies; health & wealth service providers; charitable foundations; churches and religious groups; youth, racial minorities, women, military service/veterans; neighborhood assns.; professional groups
Why is it an Issue?	• Stimulate economic vitality and growth • General health and welfare of citizenry	• Difficult to start-up service • Affordability as a natural barrier to supply and quality • Need for trained child caregivers	• Difficult to find service with quality, accessibility, and affordability • Limits working and other life choices	• Workforce demographics • Worker values • Recruitment/retention tool • Worker productivity • Quality of future workforce	• To improve future quality of life in Maryland • Respond to constituency concern
Current Perceptions and Activities	• Regulate for quality care • Provide start-up assistance on a demonstration basis • Local governments vary widely in activity & funding priority for child care	• For-profits avoid state due to barriers to entry and operation • Non-profits generally single location and constituency-dedicated • Not well organized and networked	• Not organized or networked • Location and monitoring of service requiring strong individual effort • Choice to limit workforce participation to assure quality child care	• Larger employers have or are considering initiatives and demonstration projects for on-site child care and location services; flexible work schedules; leave policies. Smaller employers offer few formal programs • Child care is a high priority labor agenda issue.	• Early stages of awareness with activity in progress to study issues in some organizations • No clear issue leadership in many communities
Future Role in Improved Child Care Delivery	• Regulate for quality care • Stimulate adequate supply, and through program development, encourage broad range of options in service • Infrastructure support to coordinate efficient delivery and system growth • Provide financial assistance for vendor start-up and for consumers who cannot afford care • Sponsor provider education • Include child care in economic development planning • Use school resources creatively.	• Provide quality, accessible, affordable care, with wide range of options • Respond to consumers • Contribute to system strength through networking, cooperative provider efforts, professional ethics, child care career promotion	• Pay for service (according to ability) • Create home environment in partnership with child care • Monitor for quality service	• Learn business and employee needs • Respond with proactive programs • Purchase services • Contribute to community efforts	• Learn and respond to group constituency; inform constituency of problems and their role in solution • Lobby in public and organization forums • Affiliate with other agencies for joint efforts • Advocate public/private funding priority; contribute time and money to improvement efforts

ORGANIZATIONS CONTACTED FOR INFORMATION

Civic, Charitable and Advocacy Groups

American Association of Retired Persons
Associated Catholic Charities of Maryland
Baltimore Jewish Council
Baltimore Urban League
Big Brothers/Big Sisters of Central Maryland
Episcopal Social Ministries
Girl Scouts of Central Maryland
Greater Baltimore YMCA
Greater Baltimore YWCA
Greater Homewood Association
Health and Welfare Council of Central Maryland
Interdenominational Ministerial Alliance
Lutheran Social Services of Maryland
Maryland Chamber of Commerce
Maryland Senior Action Council Coalition
Northwest Baltimore Corporation
Parents Without Partners, Inc. of Maryland
Park Heights Development Corporation
State League of Women Voters
State PTA Congress
Steelworkers Retirees Club
United Way of Central Maryland
Waxter Center for Senior Citizens

Employers/Unions

AFSCME Local 92
American Federation of Teachers, Local 1980
Baltimore Council of AFL-CIO Unions
Baltimore City Fire Fighters, Local 734
Baltimore Sun
Baltimore Gas & Electric Company
Bethlehem Steel
Black & Decker
Blue Cross/Blue Shield of Maryland
C & P Telephone Company
Commercial Credit Group, Inc.
Communication Workers of America, Local 2100
Domino Sugar
Equitable Bank, N.A.
Fidelity & Deposit Company of Maryland
Jiffy Lube International
Johns Hopkins Health Systems
Joseph A. Banks
Legg Mason
Lever Brothers
McCormick and Company
Monumental Corporation
Nationwide Fulfillment Systems, Inc.
PHH Company
Struever Brothers, Eccles & Rouse, Inc.
Whiting-Turner Contracting Company

Government

Baltimore County Office for Aging
Child Care Office of the Department of Community Development, Baltimore County
Director of Maryland Office of Children and Youth
Frederick County Mental Health Association
Governor's Child Care Council
Maryland Commission for Women
Maryland Department of Economic and Employment Development
Maryland Office for Aging
Maryland Secretary for Human Development
Maryland Secretary for Human Resources
Mayor's Office, Baltimore City
Child Care Division of the Department of Family Resources, Montgomery County

Child Care Provider Community

Maryland Child Care Association, Inc.
Maryland Committee for Children, Inc.

Consumers

None specifically, though many represented in other groups.

Functions of a Child Care Resource Center

The Council's model for the delivery of child care services calls for a Child Care Resource Center (CCRC) in each of the demonstration areas. The CCRC would serve as a hub of support services to strengthen and expand the child care delivery system.

The CCRC would provide the following services: child care resource and referral counseling; technical assistance for child care programs; technical assistance for employers; child care needs assessment and resource development; training for child care workers; parenting education; data collection, planning, and collaboration; and public education. Collectively, these functions form the central link of an improved child care delivery system—one that facilitates the creation of more child care programs, while enhancing the quality of care.

For each component of the CCRC to function effectively, the philosophical direction of the CCRC as a whole must subsume:

- A general approach to service delivery which is inclusive, responsive, facilitative, and fluid—rather than exclusive, rigid, directive, or static;
- A willingness to listen earnestly to parents and providers and to develop practices which respond to their needs;
- A willingness and ability to work with employers as they strive to respond to the work/family concerns of their employees;
- A willingness and capacity to work cooperatively with community agencies and institutions serving children and families; and
- A capacity to understand the local and state government policies that impact child care services in the community.

The functions of the CCRC as envisioned are described in detail in Sections I through VII that follow.

I. CHILD CARE RESOURCE AND REFERRAL (R&R) COUNSELING

The primary purpose of child care resource and referral counseling is to assist parents in selecting and locating child care that is well suited to their needs, preferences, and ability to pay.

Tenets for Effective R&R Services

1. A commitment to parental choice in child care. Underlying this commitment is a respect for the ability of all parents to choose the child care setting most appropriate for their own child. R&R agencies should not be viewed as placement services which make decisions for parents. Rather, their role is to identify available child care programs and to provide information and counseling that help parents decide for themselves which options best match the needs of their children.
2. A willingness and capacity to address the child care information and resource needs of parents in all kinds of situations. Effective R&R services acknowledge that difficulties are encountered by all working parents, regardless of income, who are looking for appropriate child care arrangements and that child care services are a major part of the support system that enables them to work.

3. A willingness and capacity to work cooperatively and non-judgmentally with providers from all sectors of the child care profession, including home-based and other-based, public and private, and profit and not-for-profit. R&R agencies must be free of bias regarding specific types of child care if they are to truly facilitate parental choice.
4. An understanding that it is preferable for a service agency to restrict its referrals to the child care providers within its region. In this way, each R&R agency serves the community about which it has the most knowledge.

Basic R&R Activities

1. Telephone counseling and referral services to help parents assess their needs and match them with available, acceptable options. Calls are followed up with a mailed computer printout of these options. Specialized information, such as eligibility for public subsidy, is available as necessary.
2. Maintaining and updating computerized referral files on the full range of child care services in the area; however, many R&R's include only regulated services in their data bases. Information is included on the type of program, hours of service, age range, capacity, fees, and verification of licensing status.
3. Publishing and distributing child care directories and other materials on choosing child care, including information on financial assistance programs.
4. Conducting activities, including follow-up contact with parents, to evaluate the effectiveness of R&R counseling services. Developing policies and procedures for responding to complaints about day care programs.
5. Documenting and reporting child care needs assessment information based on data gathered from referral calls, parent follow-up surveys, and other measures of supply-versus-demand. Maintaining data on the number of requests, ages of children needing care, time of day care is needed, and reason for needing care.

Enhanced Services (provided through an employer contract, for instance)

1. Improved access to R&R services through a private telephone line.
2. Referrals to programs that are known to have vacancies at the time of referral.
3. Continuous child care placement assistance until all community resources are exhausted.
4. Individualized on-site counseling sessions, either pre-arranged or on a drop-in basis.
5. Periodic reports to employer subscribers on their employees' rate of use of the R&R service, their employees' preferences and needs for child care (in aggregate form), and the availablity of programs in the community.

II. TECHNICAL ASSISTANCE FOR CHILD CARE PROGRAMS

A comprehensive technical assistance unit would offer information and expert advice to aid prospective child care providers with start-up and current providers with ongoing problem-solving. In the case of prospective providers, these services would be coordinated to support recruitment efforts. The technical assistance services that would be provided to day care centers and home-based child care providers are outlined below.

Technical Assistance for Center-Based Child Care

1. The CCRC would develop printed information on the following topics: regulations; zoning; program; business plan preparation; typical start-up and operating costs; resources for finding architects, builders, and equipment; funding sources; needs assessment; financial management and marketing tips; insurance requirements; legal considerations; and others. These materials would present the information in easily understood terms and would be in a format that permits updating as regulations and resources change.
2. The CCRC would develop and hold regularly scheduled seminars on the basics of day care center start-up and operation. Group sessions, such as these, are preferred over one-on-one meetings for general information dissemination in that they enable the CCRC to reach a larger audience more quickly. Follow-up assistance to individual operators would be available on a consultation basis. Services designed for specific centers (e.g., conducting a needs assessment or developing customized materials) would be subject to consultation fees.

Technical Assistance for Home-Based Child Care

1. Similar to the materials described above for center-based care, printed information would be developed and disseminated to prospective and current home-based child care operators. These materials would cover regulations, zoning, training opportunities, demand, start-up resources, and other issues of interest to this group of caregivers.
2. For prospective providers, multi-session training programs would be conducted during the several-month hiatus between initial registration and completion of the licensing process. Such sessions would be designed to better familiarize potential providers with the profession and to retain their interest during the long waiting period.

III. TECHNICAL ASSISTANCE FOR EMPLOYERS

As employers have become more aware of the impact that child care issues have on the availability and productivity of workers, they have begun to seek assistance in addressing these matters within their companies. A range of responsive employer policies, programs, and practices has been evolving in this regard. Yet, information on such options has been only minimally available to employers.

The CCRC would offer employers basic information on the available options and consultation regarding their implementation. The range of possible services is broad. For example, the CCRC could develop feasibility studies for employers who are considering ways to assist their employees with child care needs. In addition to individualized consultation services, the CCRC would have a wide variety of printed information available to employers and would convene regular seminars on employer-supported child care options.

The CCRC would also link employers with other sectors of the community who are trying to improve child care delivery. In this way, employers would become active participants in the expansion of the child care resources available within a community.

IV. CHILD CARE NEEDS ASSESSMENT AND RESOURCE DEVELOPMENT

As an R&R service improves parents' ability to find care, its success can be hampered by the depletion of child care resources in the community. Accordingly, the CCRC is charged with developing mechanisms to stimulate the supply of a variety of forms of care, including, but not limited to, center-based and family day care programs.

The CCRC must work cooperatively with a cross-section of the community, including local government, planning agencies, employers, unions, provider associations, advocates, social service agencies, and the media to develop an awareness of the need for expanded child care services. With the cooperation and involvement of the aforementioned groups, CCRCs should develop annual recruitment campaigns and training opportunities designed to encourage the expansion of care.

The basic steps within a recruitment model are as follows:

1. Identify focus groups of current, past, and potential providers to plan specific recruitment efforts.
2. Meet with licensing authorities to familiarize them with the recruitment plan and timetable and to solicit suggestions and advice.
3. Develop printed materials to distribute to potential providers.
4. Plan a public relations campaign in print and electronic media to stimulate interest in child care career opportunities.
5. Develop a public service campaign to raise awareness of the need for additional child care resources.
6. Respond to inquiries from potential providers with written materials and training opportunities.
7. Provide ongoing support to new providers by means of follow-up calls or a "hot" or "warm" line. Target periodic news mailings to new providers.
8. Evaluate the effectiveness of the campaign in terms of actual expansion of child care programs and revise campaign strategy as necessary.

Beyond conducting a recruitment campaign, the CCRC would also work with economic development interests, planning and zoning agencies, school system representatives, and other appropriate agencies to develop an overall plan for the expansion of child care centers and home-based child care programs in the community. Such a plan would consider the current child care delivery system, population trends, workforce demographics, and the location of residential/commercial/industrial centers in order to begin to anticipate and accommodate the demand for center-based care.

V. TRAINING PROGRAMS

The CCRC would offer training programs to help improve the quality of child care by offering opportunities for providers and parents to develop their skills and expand their areas of knowledge. Child care givers, who often work in isolation from other members of their professional community, can benefit greatly from informational and educational programs. Parents, too, need resources for parenting information. Such training would be provided through newsletters, workshops for center staff and family day care providers, parenting seminars, conferences, and targeted efforts to stimulate certain types of child care programs.

1. *Newsletters*
   A periodic newsletter can be a training instrument, as well as a means for fostering communication among the various sectors of the child care profession. Articles, written by CCRC staff or solicited from other child care experts, can cover a range of helpful subjects. Newsletters can also be used to announce training sessions and other events and to keep readers apprised of pertinent legislative and regulatory actions.
2. *Workshops for Center-Based Providers*
   Staff from center-based programs need access to low-cost training programs that enhance their skills and background, both in the areas of child development and center management. Workshops might address issues such as curriculum, nutrition, medical concerns, infant and toddler care, school-age care, handicapped care, emotional and cognitive development, child abuse, parental involvement, financial management, and employee relations.
3. *Workshops for Family Day Care Providers*
   While some family day care providers are educated in early childhood, many have no formal training in this area and are greatly in need of of such education. Furthermore, the income of most of these providers is low and necessitates the availability of inexpensive training and supplies. Workshops geared to this group of providers are best scheduled on Saturdays and other "off-hours." While there is overlap with the issues of interest to center-based staff, some topics are particularly suited to the needs of family day care operators, for example: "Working in Your Living Space," "Health and Safety in Your Home," and "Raising Your Own Child in Your Family Day Care Home."
4. *Workshops for Parents*
   In today's society the traditional resources for parenting education, namely one's extended family, are frequently unavailable to parents of young children. Moreover, the lifestyles of families in which all parents work vary considerably from the experience of grandparents. As a result, there is a critical need to help parents learn how to better parent their children. Accordingly, a CCRC would develop and provide parenting education opportunities by offering courses, seminars, family activities, workplace presentations, et cetera.
5. *Seminars and Conferences*
   Conferences and seminars offer child care professionals a chance to step back, catch up on some of the latest issues and information, and "network" and share with others in the field.
6. *Specialized Training*
   The CCRC might be called on periodically to conduct specialized training programs for particular groups of care givers, such as nannies or teachers at schools for children with special needs.

Additional support to child care providers and programs could be offered by the CCRC, including toy lending libraries, early childhood development libraries, substitute caregiver lists, pre-crisis counseling, free distribution of supplies, and others.

VII. DATA COLLECTION, PLANNING, AND COLLABORATION

In terms of developing solutions to child care delivery problems, there is perhaps no more important function for a CCRC than that of gathering, interpreting, and disseminating information regarding the needs of children, parents, employers, and the child care community.

The CCRC is able to maintain current data on the availability of different types of care, as well as document on a continuing basis the community's overall need for child care, the training and technical assistance needs of providers, and other issues related to the child care supply and demand. Communities need regular, ongoing information about the supply of child care of all types and the relationship of that supply to the changing pattern of demand. The services provided by a CCRC put it in a unique position for being able to gather the most current information reflective of the community's child care needs.

Additional information regarding cost, density ratios, parent preferences, unmet needs, labor force participation, regulations, zoning, et cetera is valuable planning data which CCRCs must gather and use to affect child care delivery improvement.

The information and data analysis developed by the CCRC can also be used in testimony offered to local, state and federal policy-makers and legislators, as well as in child care action campaigns, community briefings, and other public awareness programs focussed on the needs of children and families.

CCRCs should coordinate and promote community networks or groups to share information on public issues affecting child care. In collaboration with community agencies, CCRC staff utilize community organizing skills to plan, coordinate, and improve child care services.

The section above is a composite of materials developed by resource and referral services across the country, particularly those in California, Massachusetts & New Jersey. Special thanks are extended to Patti Siegel, Executive Director of the California Child Care Resource & Referral Network, for her inspirational and groundbreaking work in this field.